WELLNESS & SELF-CARE CO.

INVOICE

#000000

Billed To:
[Customer Name]
[Shipping Address]
[City, State, Zip]

Date: [Month Day, Year]
Order ID: [Order Number]
Payment: [Method]

Description	Qty	Price	Amount
Curated Self-Care Box (Seasonal Edition)	0	$0.00	$0.00
Aromatherapy Candle Add-on	0	$0.00	$0.00

Subtotal: $0.00
Shipping: $0.00
Total: $0.00

Thank you for choosing wellness.

www.wellnessco.com | support@wellnessco.com